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APPLICANTS

KATHERINE A. HIGH, MERION, PA;
 ROLAND W. HERZOG, GLENOLDEN, PA;

**** CONTINUING DATA *******
 This application is a DIV of 09/038,910 03/12/1998 PAT 6,093,392
 and claims benefit of 60/040,711 03/14/1997

**** FOREIGN APPLICATIONS *******
 NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 09/29/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 14	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 1
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Verified and Acknowledged
 Examiner's Signature: *DS* Initials: *DS*

ADDRESS
 Pillsbury Winthrop LLP
 Intellectual Property Group
 11682 El Camino Real
 Suite 200
 San Diego, CA
 92130-2593

TITLE
 METHODS AND COMPOSITIONS FOR USE IN GENE THERAPY FOR TREATMENT OF HEMOPHILIA

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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